SAMPLE 2 - child born out of wedlock



U.S. Department of State

APPLICATION FOR CONSULAR REPORT OF BIRTH ABROAD OF A CITIZEN OF THE UNITED STATES OF AMERICA

OMB NO. 1405-0011 EXPIRES: 03/31/2019 Estimated Burden: 20 minutes

Registration Number

A. THIS SECTION TO BE COMPLETED BY THE CHILD'S PARENT(S) OR GUARDIAN(S) OR THE CHILD (USE SECTION D CONTINUATION SHEET) **INFORMATION ABOUT THE CHILD** 1. Name of Child in Full SMITH KNABENA (Last/Surname) 3. Date of Birth 2. Sex 4. Place of Birth ACCRA 01/01/2017 GHANA NOTE: (If the U.S. citizen parent transmitting citizenship to the child is not present, he or she may complete State Department Form DS 5507 Affidavit of Parentage Physical Presence and Support and submit it separately. The parent completing this application should provide as much information on the parent completing the Form DS 5507 as he or she has.) INFORMATION ON MOTHER/FATHER/PARENT INFORMATION ON MOTHER FATHER PARENT 5. Full Name 11. Full Name SMITH MARK

OST/Surname) (First) PGYEMANG DORIS NAWA
(Last/Surname) (First) (Middle (Middle) 6. All Previous Legal Names Used 12. All Previous Legal Names Used (First) (Last/Surname) (Middle) (Last/Surname) (First) (Middle) (Last/Surname) (Middle) (Last/Surname) (First) (Middle) 7. Sex 8. Date of Birth 14. Date of Birth M \nearrow F 01/10/1982 (month) (day) (year) $\frac{O4}{O3}$ $\frac{O3}{O9}$ $\frac{O3}{O9}$ 9. Place of Birth 15. Place of Birth Ghana Chana (State/Province) 10. Current Physical Address (Do not list P.O. Box) 16. Current Physical Address (Do not list P.O. Box) (A.P.O. Address Permitted) (A.P.O. Address Permitted) HOUSE # CII/12
(Address Line 1) 12 North St (Address Line 1) New York , NY , USA (City, State/Province, Country, Postal Code) (City, State/Province, Country, Postal Code) 347-111-323 (Phone Number(s)) 0244-404-104 (Phone Number(s)) MARKSMITH & GMAIL. COM DAGYEMANG @ YAHOO, COM (Email Address) Use this address if Consular Report of Birth Use this address if Consular Report of Birth Yes No will be mailed? will be mailed? 17. Mailing Address (if different from Current Physical Address) (Do not list a P.O. Box.) (You may list an A.P.O. address) (Address Line 1) (City, State/Province, Country and Postal Code)

(Continued) INFORMATION ON MOTHER/FATHER/PARENT			(Continued) INFORMATION ON MOTHER/FATHER/PARENT			
18. Citizenship Are you a U.S. Citizen or U.S. Non-	Citizenship Are you a U.S. Citizen or U.S. Non-Citizen National?			19. Citizenship Are you a U.S. Citizen or U.S. Non-Citizen National? Yes No		
	MA	RITAL STATUS	OF THE PARENTS			
20. Were you married to the child's othe 21. Date and Place of Marriage to the c					A	
(month) (day) (year)	(City)		(State/Province)	(Co	untry)	
Still Married Divorced	(month) (day) /	/year) De	ath / /			
(Cont	inued)			(Continued)	[-4] V. (4.7%)	
22. Please list any other marriages (Sho Current Status) if applicable (Death, never been married, enter "None." (if use the Section D Continuation Sheet MARY SMITH 1/15/2	Divorce, Still Marrie of additional space is ot)	ed). If you have s needed, please	23. Please list any other marria Current Status) if applicable never been married, enter " use the Section D Continual	e (Death, Divorce, Still M None." (If additional space	arried). If you have	
24. Precise Periods of Time in United S (if additional space is needed, please us FIRT Place (City, State) New York , NY RETU	se the Section D Co 5 F ENTRY 11 Date (month-day-year) From 2/23/99	Date (month-day-year) To 5/3/03	25. Precise Periods of Time in (if additional space is needed, periods) FIRST DEPARTURE Place (City, State)	Promulate of the section of the sect	Date	
New York, NY	6/15/03	12/5/074	NEXT DEPARTUR FROM THE U.S.	From	То	
Boston, MA	From 1/15/08	11/3/12		From	То	
New York, NY	12/6/12	2/8/14	*	From	То	
	From	То		From	То	
	From	То		From	То	
	From	То		From	То	
	From	То		From	То	
	From	То		From	То	
	From	То		From	То	
* TRIPS OUTSIDE OF 5/3/03 - 6/15/03 : 12/5/07 - 1/15/08 : 11/3/12 - 12/6/12 -	-Ghana -Canada					

(Continued) INFORMATION ON MOTHER/FATHER/PARENT

(Continued) INFORMATION ON MOTHER/FATHER/PARENT

26. Precise Periods Abroad in U.S. Armed Forces, in other U.S. Government

Employment, with Qualifying International Organization, or as a dependent child of a person so employed (Specify) (if additional space is needed please use the Section D Continuation Sheet) Date Date

(month-day-year) (month-day-year) Branch/Agency/Org. From To From To From From To To From From To To From From From To To From

27. Precise Periods Abroad in U.S. Armed Forces, in other U.S. Government Employment, with Qualifying International Organization, or as a dependent child of a person so employed (Specify) (if additional space is needed please use the Section D Continuation Sheet)

use the Section D Continuation Strang		1	
Branch/Agency/Org.	Date (month-day-year)	Date (month-day-year)	
	From	То	
		•	

B	THIS SECTION TO BE COMPLETED BEFORE/BY CONSULAR OFFICER, NOTARY PUBLIC, OR OTHER
	PERSON QUALIFIED TO ADMINISTER OATH

NOTE: If a U.S. citizen parent transmitting citizenship to the child born out of wedlock is not present, he or she may complete State Department Form DS 550 Affidavit of Parentage Physical Presence and Support and submit separately. Only the U.S. citizen father of a child born abroad out of wedlock must complete the acknowledgement of paternity and agreement to provide financial support

28. 1	MARK	SMITH		do solemnly swear	(or affirm)(check all that apply)
			(Name)		

I am a U.S. citizen or non-citizen national. I am the father of JOHN KWABENA SMITH

(Name of Child)

who was born on O1/O1/2017 in ACCRA; Ghana My child was born out of wedlock, and I am the (Place of Birth)

the father through whom he/she is claiming U.S. citizenship. agree to provide financial support for this child until he/she reaches the age of eighteen

SUBSCRIBED AND SWORN TO (AFFIRMED) before me this ____

(Signature of Affiant) To be signed in front of a notary public DRN TO (AFFIRMED) before me this _____ day of _____ (if signed in the U.S.)

or in front a consular officer

(if being signed in Ghana) (Signature and Title of Administering Officer)

in The vis.

(Continued) THIS SECTION TO BE COMPLETED BEFORE/BY CONSULAR OFFICER, NOTARY PUBLIC, OR OTHER PERSON QUALIFIED TO ADMINISTER OATHS I SOLEMNLY SWEAR (OR AFFIRM) THAT THE STATEMENTS MADE ON THIS APPLICATION ARE TRUE TO THE 29. Affirmation: BEST OF MY KNOWLEDGE AND BELIEF Relationship to the Child Name of Person(s) Providing Information Signature of Person(s) Providing Information (Parent, Legal Guardian, Other (Specify)) Signature of Official City Date Type Name and Title of Official (month) (day) (year) Subscribed to: (SEAL) 30. Approval of Consular Report of Birth (Signature of Consular Officer) (Printed Name of Consular Officer) (month) (day) (year) (Approving Post) (Registration Number)

(Date of Approval)

C.	FOR (OFFICIAL USE		
31. Documents Presented - Please mark accounts	ordingly and provide date of d	ocument. (If more space is	required, list on separate page)	
Child's Birth Certificate / /				
(month) (day)	(year) (City)		(Province)	(Country)
Marriage Certificate//_	////////			(014)
(month) (day) ((File Date)	year) (month)(day) (year) (Date of Issuance)	(City)		(State)
	(Province)	(Country)	
Divorce Decree(s) (a) / /	1 1			
(month)(day) (y (File Date)		(City)		(State)
	(Province)	(Country)	
(b)//	1 1	T)		
(month) (day) (y		(City)		(State)
(File Date)	(Date of Issuance)			
	(Province)	Country)	
1 1	\ \ \	20 (11		
(c) / /_ (month)(day) (y	/ear) (month)(day) (year)	(City)		(State)
(File Date)				
		7		
	(Province)	(Country)	
Death Certificate(s) (a)/	/	X		
(month) (day) (year)	(City)	(State)	
(b) /	/			
(month) (day) (year)	(City)	(State)	
Mother/Father/Parent's Passport	(Passport Number)	(month) (day) (was)	(Alatinaality)	
	(Passport Number)	(month) (day) (year) (Date of Issuance)	(Nationality)	
Mother/Father/Parent's Passport				
Modienratienratents rassport _	(Passport Number)	(month) (day) (year)	(Nationality)	
— Other Identity Decument of		(Date of Issuance)		, ,
Other Identity Document of Mother/Father/Parent	(Name of the Citiz	renship Document)	(Document Number)	(month) (day) (year)
(e.g. Naturalization Certificate)	(Name of the Oldz	enship boouncity	(Boddinent Number)	(Date of Issuance)
Other Identity Document of Mother/Father/Parent (e.g. Naturalization Certificate)	Manager of the Other	ALL December 1	(D)	
(e.g. Naturalization Certificate)	(Name of the Citiz	enship Document)	(Document Number)	(month) (day) (year) (Date of Issuance)
Other Identity Document of Mother/Father/Parent				/_/
(e.g. Driver's License)	(Name of the Id	entity Document)	(Document Number)	(month) (day) (year) (Date of Issuance)
Other Identity Document of Mother/Father/Parent				/ /
(e.g. Driver's License)	(Name of the Id	entity Document)	(Document Number)	(month) (day) (year)
Other (Legal Guardianship; Power of				(Date of Issuance)
Attorney, etc.)	(Name of the	Document)	(Document Number)	(month) (day) (year)
		The state of the s		(Date of Issuance)